

Department of Forensic Science
Breath Alcohol Section
Instrument Maintenance History
1/5/2014 To 1/5/2015

HMS
JWH

Instrument Serial Number: 010484

As of 05-Jan-15

Maintenance	Certification	Technician	
Date	Date	Initials	Remarks
05-Jan-15	29-Sep-14	HMS (18910)	REPLACED UPS BACK-UP BATTERY.
29-Sep-14	29-Sep-14	HMS (18910)	CERTIFIED
12-Aug-14	10-Apr-14	HMS (18910)	REPLACED DRY GAS STANDARD, REPLACED PRINTER RIBBON.
10-Apr-14	10-Apr-14	HMS (18910)	CERTIFIED

INTOX EC/IR II
Quality Assurance Worksheet

Handwritten: HUS
Handwritten: Fred

Instrument Serial Number **010484** Worksheet Start Date **1/5/2015**
Location **Fluvanna Co.**
Address **160 Commons Boulevard, Palmyra, VA 22963**
DFS Technician **Heather Stanton** License No. **18910**

☐ Laboratory ☒ On-Site

Site Specification: No detrimental environmental conditions exist. ☒

Instrument Barometer (mm HG) **760** Reference Barometer (mm HG) **761**
Reference Barometer(RB)Serial # **009113** RB Calibration Due **4/28/2015**

Measurement Assurance Check

Standard (sea level)	PA Target	minimum	maximum	Sample 1	0.305
0.300	0.300	0.291	0.309	Sample 2	0.304
Precision		sample min	sample max	Sample 3	0.304
0.001		0.304	0.305		

Standard (sea level)	PA Target	minimum	maximum	Sample 1	0.099
0.100	0.100	0.097	0.103	Sample 2	0.099
Precision		sample min	sample max	Sample 3	0.099
0		0.099	0.099		

Dry gas standard Lot No. (with tank no.)

AG404902-08

☐ Replaced dry gas standard (+O-ring)

☐ Installed at Location

☐ Removed to DFS-Central

Supplies
Mouthpieces
Certificates of Analysis
Operator Worksheet
Other:



Notes:

Replaced UPS back-up battery.

Instrument Serial Number

010484

Certification Date

☐ Calibrated☐ Certified☒ Measurement Assurance Check☒ Instrument Test☐ Troubleshooting/Maintenance Worksheet Completed

(Successful completion denotes satisfactory condition of the item.)

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.250		0.000	0.000	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.150		0.000	0.000	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.080		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.020		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

All measurements are in g/210L

Estimation of Uncertainty of Measurement and traceability records are located within the Breath Alcohol Section

DFS Technician

Heath A. Stark

Date

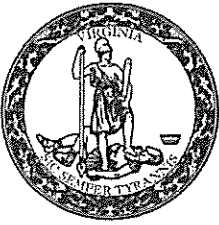
1/5/15 1/12/15 4/1/15

Issuing Analyst

Jed
JP

Date

1/12/15




COMMONWEALTH OF VIRGINIA
DEPARTMENT OF FORENSIC SCIENCE

CERTIFICATE OF BLOOD ALCOHOL ANALYSIS
AS DETERMINED BY A CHEMICAL TEST OF THE ACCUSED'S BREATH

Handwritten initials: HMS, Srd

NAME OF ACCUSED INSTRUMENT, TEST,	NAME OF COURT DFS
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BREATH ANALYSIS

SAMPLE EXAMINED AND TEST CONDUCTED BY STANTON, HEATHER, M		AGENCY DFS Central Lab
DFS LICENSE NUMBER 18910	LICENSE EXPIRES 10/01/2016	DATE TEST CONDUCTED 01/05/2015
TEST EQUIPMENT NUMBER 010484		

RESULTS: TIME SAMPLE TAKEN 11:45 EST
0.00
SAMPLE'S ALCOHOL CONTENT _____ GRAMS PER 210 LITERS OF BREATH

Replaced UPS back-up battery.

HMS 1/5/15

ATTEST:

I CERTIFY THAT THE ABOVE IS AN ACCURATE RECORD OF THE TEST CONDUCTED; THAT THE TEST WAS CONDUCTED WITH THE TYPE OF EQUIPMENT AND IN ACCORDANCE WITH THE METHODS APPROVED BY THE DEPARTMENT OF FORENSIC SCIENCE; THAT THE TEST WAS CONDUCTED IN ACCORDANCE WITH THE DEPARTMENT'S SPECIFICATIONS; THAT PRIOR TO ADMINISTRATION OF THE TEST THE ACCUSED WAS ADVISED OF HIS RIGHT TO OBSERVE THE PROCESS AND SEE THE BLOOD ALCOHOL READING ON THE EQUIPMENT USED TO PERFORM THE BREATH TEST, AND THAT I POSSESS A VALID LICENSE TO CONDUCT SUCH TEST, GIVEN UNDER MY HAND THIS _____ DAY OF _____, 20____.

BREATH TEST OPERATOR

☐ I HAVE RECEIVED A COPY OF THIS CERTIFICATE OF ANALYSIS _____
SUBJECT'S SIGNATURE

☐ SUBJECT REFUSED TO SIGN FOR COPY OF CERTIFICATE OF ANALYSIS _____
OPERATOR'S SIGNATURE



IntoxNet MIS Report

Report Generated 05 Jan 2015 at 12:30

for
Ans
1/12/15

Test Results

Instrument Serial Number 010484

Test # 000793

Subject Test

Test Location 1 Department of

Test Date 05 Jan 2015

Test Location 2 Forensic Science

Test Time 11:39

Remote/Local Local

Test Location 3

System Check Passed

Operator's Last Name STANTON

Agency DFS Central Lab

Card Serial Number 118910

Subject's Last Name INSTRUMENT

Subject's Middle Initial

Driver's License Number

Driver's License State

End Date 05 Jan 2015 End Time 11:46

Data Type DIAG

Data Type BLK

Data Type CHK

Data Type BLK

Data Type SUBJ

Data Type BLK

Data Type SUBJ

Data Type BLK

Standard Type Dry Gas Std

Standard Lot Number AG404902-08

Tank Pressure 914

Blow Sample Number 1 Blow Duration 3.33 sec

Blow Sample Number 2 Blow Duration 3.31 sec

Tamper Evident Stamp 391ccb1b

Test Status Success

Operator's First Name HEATHER

Effective Date 10/01/2014

Subject's Date of Birth 00/00/0000

License Number 18910

Subject's First Name TEST

Driver's License Expiration 00/00/0000

Court Name DFS

Result Date 05 Jan 2015 Result 0.00

Result Time 11:45

Sample Value Pass

Sample Value 0.000

Sample Value 0.101

Sample Value 0.000

Sample Value 0.000

Sample Value 0.000

Sample Value 0.000

Sample Value 0.000

Standard Value 0.100

Standard Expiration Date 02/18/2016

Barometric Pressure 760 mmHg

Blow Volume 1786 cc End-of-Blow Time 11:43

Blow Volume 1781 cc End-of-Blow Time 11:45

Test Status Code 0

HMS
Jed

Intox EC/IR-II: Accuracy Check

Department of Forensic Science

Serial Number: 010484 Test Number: 794

Test Date: 01/05/2015 Test Time: 11:56 EST

Dry Gas Target: 0.300

Lot Number: AG428003-09 Exp Date: 10/07/2016

Tank Pressure: 512 psi Barometric Pressure: 759 mmHg

System Check: *Passed*

Test	g/210L	Time
BLK	0.000	11:57
CHK	0.305	11:57
BLK	0.000	11:59
CHK	0.304	12:00
BLK	0.000	12:02
CHK	0.304	12:03

Test Status: *Success*

Calibration CRC: 2E06FC2F

hmg
fel

Intox EC/IR-II: Accuracy Check

Department of Forensic Science

Serial Number: 010484 Test Number: 795

Test Date: 01/05/2015 Test Time: 12:06 EST

Dry Gas Target: 0.100

Lot Number: AG404902-08 Exp Date: 02/18/2016

Tank Pressure: 909 psi Barometric Pressure: 759 mmHg

System Check: *Passed*

Test	g/210L	Time
BLK	0.000	12:07
CHK	0.099	12:08
BLK	0.000	12:09
CHK	0.099	12:10
BLK	0.000	12:11
CHK	0.099	12:12

Test Status: *Success*

Calibration CRC: 2E06FC2F




COMMONWEALTH OF VIRGINIA
DEPARTMENT OF FORENSIC SCIENCE

CERTIFICATE OF BLOOD ALCOHOL ANALYSIS
AS DETERMINED BY A CHEMICAL TEST OF THE ACCUSED'S BREATH

lines
sub

NAME OF ACCUSED INSTRUMENT, TEST,	NAME OF COURT DFS
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BREATH ANALYSIS

SAMPLE EXAMINED AND TEST CONDUCTED BY STANTON, HEATHER, M		AGENCY DFS Central Lab
DFS LICENSE NUMBER 18910	LICENSE EXPIRES 10/01/2016	DATE TEST CONDUCTED 01/05/2015
TEST EQUIPMENT NUMBER 010484		

RESULTS: TIME SAMPLE TAKEN 12:20 EST
SAMPLE'S ALCOHOL CONTENT 0.00 GRAMS PER 210 LITERS OF BREATH

ATTEST:

I CERTIFY THAT THE ABOVE IS AN ACCURATE RECORD OF THE TEST CONDUCTED; THAT THE TEST WAS CONDUCTED WITH THE TYPE OF EQUIPMENT AND IN ACCORDANCE WITH THE METHODS APPROVED BY THE DEPARTMENT OF FORENSIC SCIENCE; THAT THE TEST WAS CONDUCTED IN ACCORDANCE WITH THE DEPARTMENT'S SPECIFICATIONS; THAT PRIOR TO ADMINISTRATION OF THE TEST THE ACCUSED WAS ADVISED OF HIS RIGHT TO OBSERVE THE PROCESS AND SEE THE BLOOD ALCOHOL READING ON THE EQUIPMENT USED TO PERFORM THE BREATH TEST, AND THAT I POSSESS A VALID LICENSE TO CONDUCT SUCH TEST, GIVEN UNDER MY HAND THIS _____ DAY OF _____, 20_____.

BREATH TEST OPERATOR

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☐ SUBJECT REFUSED TO SIGN FOR COPY OF CERTIFICATE OF ANALYSIS _____ OPERATOR'S SIGNATURE



IntoxNet MIS Report

Report Generated 05 Jan 2015 at 12:30

5ed
hms
1/12/15

Test Results

Instrument Serial Number 010484

Test # 000796

Subject Test

Test Location 1 Department of
Test Date 05 Jan 2015

Test Location 2 Forensic Science

Test Time 12:13

Remote/Local Local

Test Location 3

System Check Passed

Operator's Last Name STANTON

Agency DFS Central Lab

Card Serial Number 118910

Subject's Last Name INSTRUMENT

Subject's Middle Initial

Driver's License Number

Driver's License State

End Date 05 Jan 2015

End Time 12:21

Data Type DIAG

Data Type BLK

Data Type CHK

Data Type BLK

Data Type SUBJ

Data Type BLK

Data Type SUBJ

Data Type BLK

Standard Type Dry Gas Std

Standard Lot Number AG404902-08

Tank Pressure 899

Blow Sample Number 1

Blow Duration 3.54 sec

Blow Sample Number 2

Blow Duration 3.18 sec

Tamper Evident Stamp cc2b831e

Test Status Success

Operator's First Name HEATHER

Effective Date 10/01/2014

Subject's Date of Birth 00/00/0000

Subject's First Name TEST

Driver's License Expiration 00/00/0000

Court Name DFS

Result Time 12:20

Sample Value Pass

Sample Value 0.000

Sample Value 0.099

Sample Value 0.000

Sample Value 0.000

Sample Value 0.000

Sample Value 0.000

Sample Value 0.000

Standard Value 0.100

Standard Expiration Date 02/18/2016

Barometric Pressure 759 mmHg

Blow Volume 1790 cc

End-of-Blow Time 12:17

Blow Volume 1830 cc

End-of-Blow Time 12:20

Test Status Code 0

Department of Forensic Science
Breath Alcohol Section
Trouble Call Log
1/5/2015 To 1/5/2015

HMS
Sed

Instrument Serial Number: 010484

05-Jan-15

Date: 05-Jan-15 **Time:** 12:19 AM **Remote:** True **Tech:** HMS (18910) **Location:** Fluvanna County Sheriff's Office

Indication: LOSS OF POWER

Problem: LOSS OF POWER TO THE INSTRUMENT.

Technician Response: SITE VISIT CONDUCTED. ISSUE RESOLVED.

Resolution: RETURNED TO SERVICE.
